

## JAPAN

1. Per USCINCPACINST 6200.2, Commanders are responsible for an effective Force Health Protection Plan for personnel deploying to locations within the USCP AOR, ensuring implementation of the Plan, for appointing a FHP Officer and assistant who will serve as the Commander's focal point for the planning, coordination, and execution of "real world" force health protection planning for a specific deployment. This is applicable to all assigned and attached personnel, all Department of Defense personnel performing official duties within locations in the AOR, and all US contractor personnel employed directly by the DOD in locations in the AOR.

2. FHP Planning must include the following elements:

a. Health Threat Assessment. This assessment must evaluate known and anticipated health threat/hazards and the appropriate countermeasures to be taken for each.

b. Health Record and Readiness Screening. This task is ongoing and must be validated before deployment.

c. Health Threat Briefing. Must be performed prior to deployment. Attendance must be documented. Minimum contents of a Health Threat Briefing for Japan include the following material:

(1) Immunizations.

(a) Personnel must be up to date on all routine immunizations for personnel on deployable status (tetanus booster, hepatitis A, MMR, typhoid, influenza).

(b) Japanese encephalitis vaccine is generally not indicated unless traveling to rural areas for prolonged periods. Unvaccinated travelers are at potential risk if staying in rural-agricultural pig farming areas longer than 2-3 weeks. Peak transmission period is May through September. Japanese encephalitis is under control due to widespread vaccination program in Japan.

(2) Chemoprophylaxis for malaria is not recommended. Malaria is not endemic.

d. Personal Protective Measures.

(1) Safe Food and Water. In general, low risk of traveler's diarrhea. Community sanitation is generally good, and health concerns related to foods and beverages are minimal.

(2) Sexually transmitted diseases. The consequences of these infections can range from sterility to death. HIV transmission is established. Abstinence is the most effective preventive measure. Latex condoms should be used if sexually active, but may not prevent transmission of these diseases, even if used correctly.

(3) Endemic diseases.

(a) Schistosomiasis infection occurs secondary to skin penetration by waterborne larvae that develop in snails in freshwater habitats. Avoid exposure to ponds, lakes, irrigation canals, and slow moving streams/rivers.

(b) Lung fluke disease is reported. To prevent this disease, avoid eating raw crab or crayfish.

(c) Chinese liver fluke and giant intestinal fluke are transmitted by raw fish. Prevention is through thorough cooking of fish prior to consumption.

(4) Environmental Factors. Japan's climate generally is humid and temperate, with significant seasonal and geographic variations. Winter varies in severity. Storm severity and snow accumulation are greatest in the northwest. Necessary precautions

include drinking water frequently, on a schedule, to avoid dehydration; adhering to safe work-rest cycles during extreme conditions; and careful observation of teammates to detect warning signs of heat injury such as mental status changes and cessation of sweating.

(5) Hazardous animals. Rabies is not a risk. Scorpions, however, are present. Although scorpions are capable of inflicting a painful sting occur, none of them are known to be life-threatening. Do not attempt to handle scorpions.

(6) Motor Vehicle and General Safety.

(a) One of the greatest risk when traveling overseas is motor vehicle accidents. Seat belts and extreme caution in and around vehicles must be practiced. Driving in Japan is complicated for those who cannot read the language. City traffic is often congested.

(b) General safety. Exercise caution in all activities to avoid injury of any type. If you are seriously injured, there may be no option other than medical care in a facility where sterility of equipment and safety of blood products are far below those in the US.

3. Assistance with Health Threat assessments, briefings, and countermeasures planning, as well as for the most up to date information, can be obtained from the following sources:

a. Air Force: Pacific Air Force Public Health Officer, Hickam Air Force Base, phone (DSN or 808) 449-2332, x269.

b. Army: Health Promotion and Preventive Medicine Department, Tripler Army Medical Center, phone (DSN or 808) 433-6693.

c. Navy: Epidemiology Department, Navy Environmental and Preventive Medicine Unit 6, phone (DSN or 808) 473-0555.

d. Up to date State Department advisory and Consular Information Sheet can be obtained at <http://travel.state.gov>.